Centers for Medicare & Medicaid Services

Office of Information Technology Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System: HETS 270/271

HETS2025-4 Release Summary Document

Version 1.0

09/30/2025

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Introduction

This document informs Submitters of upcoming changes to the Health Insurance Portability and Accountability Act (HIPAA) Eligibility Transaction System (HETS) 270/271 application that will be implemented with the HETS2025-4 release.

Overview of Release

The HETS2025-4 release introduces potential changes to the HETS 271 response.

The following section documents planned HETS2025-4 changes.

Summary of the Impact on Trading Partners

3.1 Enhance HETS to Identify PACE Medicare Advantage (MA) Plans in the 271 Response

Programs of All-Inclusive Care for the Elderly (PACE) are excluded from the Inpatient Prospective Payment System for direct graduate medical and nursing and allied health education for Medicare Advantage enrollees.

See the Medicare Claims Processing Manual, Chapter 3, Section 20.8, to find out when Medical Education billing is appropriate. For more information, please refer to the CMS Internet Only Manual (IOM), Publication 100-11, Chapter 11.

HETS 271 MA plans' response will be enhanced to use a modified 2110C MSG segment to identify them as PACE plans. The modified MSG01 will have an additional prefix "PACE Plan – "(changes in **bold** and *italics*):

MSG***PACE Plan -** MA Bill Option Code – *X*~ (whereas *X* is the Bill Option Code)

All other base MA Business Rules remain unchanged as specified in Section 7.19 of the HETS 270/271 Companion Guide.

3.2 Update Medicare Diabetes Prevention Program (MDPP) Response to Potentially Include HCPCS Code G9871

HETS 270/271 supports Service Type Code 'CQ' (Case Management) in the HETS 270 request. HETS Submitters can utilize the 'CQ' STC to request eligibility details for the Medicare Diabetes Prevention Program (MDPP).

When this STC is present on the HETS 270 request and all other provided information creates a match, the 271 response includes Medicare Beneficiary eligibility, historic details from up to 50 previous MDPP benefit usage records (if applicable), and zero patient financial liability for MDPP services.

If relevant to the Medicare Beneficiary, the HETS 271 response also returns End Stage Renal Disease (ESRD) information when STC 'CQ' is present. The HETS 271 response returns MDPP Eligibility separately from other Part B-covered services, reflecting only the requested dates. Active Medicare Part B coverage is required for MDPP eligibility.

The HETS 271 MDPP response may include all the HCPCS listed in Section 7.22 of the HETS 270/271 Companion Guide. Effective with this release, the HETS 271 MDPP response will be updated to include HCPCS Code G9871 as well.

Note that the scheduled date for the related CWF production deployment is currently January 6, 2026; HETS will not return any prior service history for HCPCS G9871 on the 271 response until after the CWF data feed is updated via their quarterly release. Once data is available, based on prior usage and service history of the MDPP HCPCS code G9871, it may be returned multiple times in the 271 response.

When available, the 271 response for MDPP HCPCS G9871 will also include the number of remaining sessions for that service.

Example MDPP segments for HCPCS Code G9871 in a standard 271 response:

EB*1**CQ*MB~
DTP*292*RD8*CCYYMMDD-CCYYMMDD~ (DTP03 = MDPP entitlement period)
DTP*194*D8*CCYYMMDD~ (DTP03 = MDPP End Date of Period 2)
EB*C**CQ*MB**23*0~ (EB07 = deductible amount of "0")
DTP*292*RD8*CCYYMMDD-CCYYMMDD~
EB*A**CQ*MB**27*0~ (EB07 = coinsurance amount of "0")
DTP*292*RD8* CCYYMMDD-CCYYMMDD~
EB*F***MB*********HC|*G9871*~ (Sessions remaining – G9871)
HSD*VS*17***10~ (HSD02 = Session count, HSD05 = 'Remaining')
EB*D***MB*********HC|**G9871**~ (MDPP HCPCS code G9871 with prior service)
DTP*472*D8*20260110~ (date of service)
LS*2120~
NM1*1P*2******XX*1222222223~ (NPI rendering MDPP G9871 service)
LE*2120~

All other MDPP business rules are unchanged. For additional information, refer to Section 7.22 of the HETS 270/271 Companion Guide.

3.3 Potential 2026 Changes to HETS-supported HCPCS Codes

Effective with the HETS2025-4 release, if necessary, HETS will prepare for industry-mandated changes to HCPCS codes. Potential changes involve modifying HETS 270/271 logic for any supported HCPCS codes that may be replaced or terminated effective January 1, 2026. All currently supported HCPCS codes will remain functional until at least December 31, 2025.

CMS will provide additional notification if HETS 270/271 Submitters are required to make any HCPCS-related changes. Refer to Sections 7.2 and/or 7.10 of the HETS 270/271 Companion Guide for additional information.

Appendix A. Revision History

Table 1 provides a record of changes made to this document.

Table 1: Record of Changes

Version	Date	Description of Changes
1.0	09/30/2025	Initial release/base version.